



June 16, 2005

MEMORANDUM

TO: Administrators, Hospitals

FROM: Dennis L. Gibbs, Director
Division of Health Licensing

SUBJ: Lewis Blackman Hospital Patient Safety Act

Compliance with the Lewis Blackman Hospital Patient Safety Act in conjunction with the current standards is required and the Department will enforce the act through inspection.

Article 27, Section 44-7-3410 *et. seq.*, (Lewis Blackman Hospital Patient Safety Act) has been added to the SC Code of Laws, effective June 8, 2005. The Act authorizes DHEC to implement and enforce the provisions contained therein and generally requires hospitals to, among other things:

A. **Identify** all clinical staff, clinical trainees, medical students, interns, and resident physicians (as defined in the Act) as such with identification badges that include their names, their departments, and their job or trainee titles. All the above must be clearly visible and explicitly identified as such on their badges and must be stated in terms or abbreviations reasonably understandable;

B. **Institute** a procedure whereby a patient may request that a nurse call his or her attending physician (as defined in the Act) regarding the patient's personal medical care. If so requested, the nurse shall place the call and notify the physician and or his or her designee of the patient's concerns. If the patient is able to communicate with and desires to call his or her attending physician or designee (as defined in the Act), upon the patient's request, the nurse must provide the patient with the telephone number and assist the patient in placing the call;

C. **Provide** a mechanism available at all times, and the method for accessing it, through which a patient may access prompt assistance for the resolution of the patient's personal medical care concerns. 'Mechanism' means telephone number, beeper

number, or other means of allowing a patient to independently access the patient assistance system. If a patient needs assistance, a clinical staff member or clinical trainee (as defined in the Act) must assist the patient in accessing the mechanism;

D. **Establish** procedures for the implementation of the mechanism providing for initiation of contact with administrative or supervisory clinical staff who shall promptly assess the urgent patient care concern and cause the patient care concern to be addressed;

E. **Provide** to each patient prior to, or at the time of the patient's admission to the hospital for inpatient care or outpatient surgery, written information describing the general role of clinical trainees, medical students, interns, and resident physicians in patient care. This information must also:

1. **State** whether medical students, interns, or resident physicians may be participating in a patient's care, may be making treatment decisions for the patient, or may be participating in or performing, in whole or in part, any surgery on the patient;

2. **Notify** the patient that the attending physician is the person responsible for the patient's care while the patient is in the hospital and that the patient's attending physician may change during the patient's hospitalization;

3. **Include** a description of the mechanism (see above) providing for initiation of contact with administrative or supervisory clinical staff and the method for accessing it.

This memorandum serves only as a general summary of the requirements of the Act. For more specific information concerning The Lewis Blackman Hospital Patient Safety Act, please refer to:

http://www.scstatehouse.net/sess116_2005-2006/bills/3832.htm or the

Department's Health Regulation Home Page:

<http://www.scdhec.gov/hr/>

Should you have any questions regarding this change, please call Randy Clark at (803) 545-4230.

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